PATENT APPLICATION FEE DETERMINATION RECORD

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Effective January 1, 2003

Application or Docket Number

10672413

CLAIMS AS FILED - PART I								SMALL ENTITY		OTHER THAN		
			(Column 1)		(Column 2)			TYPE		OR	SMALL	
TOTAL CLAIMS			20					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			20 minus 20=		• 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS) minus 3 =		0			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	ı	TOTAL		OR	TOTAL	150
3 7 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	OTHER SMALL	THAN
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 17	Minus	** ~	20	=] [X\$ 9=		OR	X\$18=	
	Independent	+ 2	Minus	***	3	=		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							. [+140=		OR	+280=	
							į.	TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)		ODA. I CE			ADDII. (EE)	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		-]	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDENT	CLAIM		J	+140=		OR	+280=	
							L	TOTAL IDDIT. FEE		OB	TOTAL ADDIT, FEE	
		(Column 1)		(Colur		(Column 3)					ADDIT: 1 CE.	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=]	X42=			X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1			OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+140=		OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	
	The "Highest Nur	nber Previously Pa	d For" (Total o	r independ	ent) is the	highest numb	er fou	nd in the app	ropriate box	in ca	lumn 1.	